	1111	HEDDING ENTERED AT 05.00.55 ON 15 NOV 2007			
L1		4369	S	CCR5	
L2		347	S	L1 P	ND STRUCTURE
L3		0	S	L2 A	ND (PM-1 OR SUPT1)
L4		285	S	L2 P	ND (HIV OR HUMAN IMMUNODEFICIENCY VIRUS)
L5					ND SEQUENCE
L6		11	S	L5 A	ND PY<1998
L7		718	S	L1 A	ND ANTAGONIST?
L8		10	S	L7 A	ND PY<1998
L9		10	S	L8 N	OT L6
	FILE	'WPIDS	3'	ENTE	RED AT 05:22:41 ON 13 NOV 2007
L10		596	S	CCR5	
L11		201	S	L10	AND ANTAGONIST?
L12		167	S	L11	AND (HIV OR HUMAN IMMUNODEFICIENCY VIRUS)
L13		0	S	L12	AND PY<1998
	FILE	'USPATFULL' ENTERED AT 05:23:40 ON 13 NOV 2007			
L14		2776	S	CCR5	
L15		1857	S	L14	AND ANTAGONIST?
L16		1576	S	L15	AND (HIV OR HUMAN IMMUNODEFICIENCY VIRUS)
L17		236	S	L16	AND CCR5/CLM
L18		72	S	L17	AND ANTAGONIST?/CLM
L19		62	S	L18	AND (HIV/CLM OR HUMAN IMMUNODEFICIENCY VIRUS/CLM)
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`FILE 'MEDLINE' ENTERED AT 05:00:33 ON 13 NOV 2007 4369 S CCR5

- 97327540. PubMed ID: 9184207. HIV-1-induced cell fusion is mediated by multiple regions within both the viral envelope and the CCR-5 co-receptor. Bieniasz P D; Fridell R A; Aramori I; Ferguson S S; Caron M G; Cullen B R. (Howard Hughes Medical Institute, Department of Genetics, Duke University Medical Center, Durham, NC 27710, USA.) The EMBO journal, (1997 May 15) Vol. 16, No. 10, pp. 2599-609. Journal code: 8208664. ISSN: 0261-4189. Pub. country: ENGLAND: United Kingdom. Language: English.
- AΒ Although the human hCCR-5 chemokine receptor can serve as a co-receptor for both M-tropic (ADA and BaL) and dual-tropic (89.6) strains of human immunodeficiency virus type 1 (HIV-1), the closely related mouse mCCR-5 homolog is inactive. We used chimeric hCCR-5-mCCR-5 receptor molecules to examine the functional importance of the three extracellular domains of hCCR-5 that differ in sequence from their mCCR-5 equivalents. While this analysis revealed that all three of these extracellular domains could participate in the functional interaction with HIV-1 envelope, clear differences were observed when different HIV-1 strains were analyzed. Thus, while the ADA HIV-1 isolate could effectively utilize chimeric human-mouse CCR-5 chimeras containing any single human extracellular domain, the BaL isolate required any two human extracellular sequences while the 89.6 isolate would only interact effectively with chimeras containing all three human extracellular sequences. Further analysis using hybrid HIV-1 envelope proteins showed that the difference in co-receptor specificity displayed by the ADA and BaL isolates was due partly to a single amino acid change in the V3 loop, although this interaction was clearly also modulated by other envelope domains. Overall, these data indicate that the interaction between HIV-1 envelope and CCR-5 is not only complex but also subject to marked, HIV-1 isolate-dependent variation.

PubMed ID: 8898197. Regions in beta-chemokine receptors CCR5 and CCR2b that determine HIV-1 cofactor specificity. Rucker J; Samson M; Doranz B J; Libert F; Berson J F; Yi Y; Smyth R J; Collman R G; Broder C C; Vassart G; Doms R W; Parmentier M. (Department of Pathology and Laboratory Medicine, University of Pennsylvania, Philadelphia 19104, USA.) Cell, (1996 Nov 1) Vol. 87, No. 3, pp. 437-46. Journal code: 0413066. ISSN: 0092-8674. Pub. country: United States. Language: English. AΒ Macrophage-tropic (M-tropic) HIV-1 strains use the beta-chemokine receptor CCR5, but not CCR2b, as a cofactor for membrane fusion and infection, while the dual-tropic strain 89.6 uses both. CCR5/2b chimeras and mutants were used to map regions of CCR5 important for cofactor function and specificity. M-tropic strains required either the amino-terminal domain or the first extracellular loop of CCR5. A CCR2b chimera containing the first 20 N-terminal residues of CCR5 supported M-tropic envelope protein fusion. Amino-terminal truncations of CCR5/CCR2b chimeras indicated that residues 2-5 are important for M-tropic viruses, while 89.6 is dependent on residues 6-9. The identification of multiple functionally important regions in CCR5, coupled with differences in how CCR5 is used by M- and dual-tropic viruses, suggests that interactions between HIV-1 and entry cofactors

are conformationally complex.

97477421. PubMed ID: 9334377. Interaction of chemokine receptor CCR5 with its ligands: multiple domains for HIV-1 gp120 binding and a single domain for chemokine binding. Wu L; LaRosa G; Kassam N; Gordon C J; Heath H; Ruffing N; Chen H; Humblias J; Samson M; Parmentier M; Moore J P; Mackay C R. (LeukoSite, Inc., Cambridge, Massachusetts 02142, USA.. lijun_wu@leukosite.com) . The Journal of experimental medicine, (1997 Oct 20) Vol. 186, No. 8, pp. 1373-81. Journal code: 2985109R. ISSN: 0022-1007. Pub. country: United States. Language: English.

AΒ

CCR5 is a chemokine receptor expressed by T cells and macrophages, which also functions as the principal coreceptor for macrophage (M)-tropic strains of HIV-1. To understand the molecular basis of the binding of chemokines and HIV-1 to CCR5, we developed a number of mAbs that inhibit the various interactions of CCR5, and mapped the binding sites of these mAbs using a panel of CCR5/CCR2b chimeras. One mAb termed 2D7 completely blocked the binding and chemotaxis of the three natural chemokine ligands of CCR5, RANTES (regulated on activation normal T cell expressed and secreted), macrophage inflammatory protein (MIP)-lalpha, and MIP-1beta, to CCR5 transfectants. This mAb was a genuine antagonist of CCR5, since it failed to stimulate an increase in intracellular calcium concentration in the CCR5 transfectants, but blocked calcium responses elicited by RANTES, MIP-lalpha, or MIP-lbeta. This mAb inhibited most of the RANTES and MIP-lalpha chemotactic responses of activated T cells, but not of monocytes, suggesting differential usage of chemokine receptors by these two cell types. The 2D7 binding site mapped to the second extracellular loop of CCR5, whereas a group of mAbs that failed to block chemokine binding all mapped to the NH2-terminal region of CCR5. Efficient inhibition of an M-tropic HIV-1-derived envelope glycoprotein gp120 binding to CCR5 could be achieved with mAbs recognizing either the second extracellular loop or the NH2-terminal region, although the former showed superior inhibition. Additionally, 2D7 efficiently blocked the infectivity of several M-tropic and dual-tropic HIV-1 strains in vitro. These results suggest a complicated pattern of HIV-1 gp120 binding to different regions of CCR5, but a relatively simple pattern for chemokine binding. We conclude that the second extracellular loop of CCR5 is an ideal target site for the development of inhibitors of either chemokine or HIV-1 binding to CCR5.

97248644. PubMed ID: 9092481. Potent inhibition of HIV-1 infectivity in macrophages and lymphocytes by a novel CCR5 antagonist. Simmons G; Clapham P R; Picard L; Offord R E; Rosenkilde M M; Schwartz T W; Buser R; Wells T N; Proudfoot A E. (Virology Group, Chester Beatty Laboratories, Institute of Cancer Research, 237 Fulham Road, London SW3 6JB, UK.) Science (New York, N.Y.), (1997 Apr 11) Vol. 276, No. 5310, pp. 276-9. Journal code: 0404511. ISSN: 0036-8075. Pub. country: United States. Language: English.

The chemokine receptors CXCR4 and CCR5 have recently been shown to act AB as coreceptors, in concert with CD4, for human immunodeficiency virus-type 1 (HIV-1) infection. RANTES and other chemokines that interact with CCR5 and block infection of peripheral blood mononuclear cell cultures inhibit infection of primary macrophages inefficiently at best. If used to treat HIV-1-infected individuals, these chemokines could fail to influence HIV replication in nonlymphocyte compartments while promoting unwanted inflammatory side effects. A derivative of RANTES that was created by chemical modification of the amino terminus, aminooxypentane (AOP)-RANTES, did not induce chemotaxis and was a subnanomolar antagonist of CCR5 function in monocytes. It potently inhibited infection of diverse cell types (including macrophages and lymphocytes) by nonsyncytium-inducing, macrophage-tropic HIV-1 strains. Thus, activation of cells by chemokines is not a prerequisite for the inhibition of viral uptake and replication. Chemokine receptor antagonists like AOP-RANTES that achieve full receptor occupancy at nanomolar concentrations are strong candidates for the therapy of HIV-1-infected individuals.